



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 5694

| | | | | |
|-----------------------------|--|--------------|------------------------|--|
| SERIAL NUMBER 10/848,929 | FILING OR 371(c) DATE 05/18/2004 RULE | CLASS 433 | GROUP ART UNIT 3732 | ATTORNEY DOCKET NO. 1029-358-CIP |
|-----------------------------|--|--------------|------------------------|--|

APPLICANTS

Ray Winston Freeman JR., Pine, CO;
 George Kantor, Denver, CO;
 Paul Ritter Smith, Denver, CO;
 Michael Dean Stevens, Littleton, CO;
 Daphne Upchurch, Lakewood, CO;
 David R. Wolf, Lakewood, CO;
 Rosilio Ronald Perez, Vista, CA;

** CONTINUING DATA *****

This application is a CIP of 10/284,016 10/29/2002 PAT 6,846,178

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 07/19/2004

| | | | | | |
|---------------------------------|---|--|----------------------|--------------------|-------------------------|
| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY CO | SHEETS DRAWING 20 | TOTAL CLAIMS 16 | INDEPENDENT CLAIMS 3 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | <input type="checkbox"/> Met after Allowance | | | |
| Verified and Acknowledged | Examiner's Signature _____ | Initials _____ | | | |

ADDRESS

22442

TITLE

EDGEWISE ORTHODONTIC BRACKET WITH CHARACTER BASE

| | | |
|-----------------------------|---|---|
| FILING FEE RECEIVED 1350 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|-----------------------------|---|---|